



# Spring Soccer 2016 (1st - 7th Grade)

#### PRE-REGISTRATION REQUIRED

(Register online @ www.norwalk.iowa.gov, Parks and Recreation office, or by mail)

This soccer program is for children in 1st through 7th grade this current school year. Shin guards are required for this program. Parks and Rec provides a team shirt. This is a six-week program including one practice and one game each week. **Volunteer coaches will be**needed.

#### **Dates**

Registration Dates: Jan 25 to Feb 5

**Program Dates:** March 28 (weather permitting)

Program Times: 6:00 pm

#### Information

Cost: \$51.00 residents \$58.65 non-resident

**Location:** Norwalk-McAninch Sports Complex

**Equipment needed:** shin guards

#### Divisons:

1st & 2nd Grade Boys; 4 vs 4 - Play on Tues & Fri 1st & 2nd Grade Girls; 4 vs 4 - Play on Mon & Thurs 3rd & 4th Grade Coed; 8 vs 8 - Play on Mon & Thurs 5th - 7th Grade Coed; 8 vs 8 - Play on Tues & Fri (practice/game nights are tentative)

**Late Fee:** A late fee of \$15.00 will be assessed in addition to the regular fee for any registration taken after the Friday, February 6 deadline, pending there is room still available with a team. If the shirt order has been placed, a shirt will not be provided.

Financial assistance may be available for those participants that cannot afford the registration fee - call or stop by if you are interested.



## Norwalk Parks and Recreation Registration Form

### **Individual Information:**

	Firs	t	MI		Last	
Name:						
Birth Date:		Grade	e:	Sex:	Shirt Size:	
Days of the we	ek you may have co	onflicts (dance, etc)	Shirt size	choices: YS (6-8) Y	M (10-12) YL (14-16) AS AM AL AX 	
Address:						
City,State,Zip:			I,	4		
Daytime Phone	» #:			Type:		
Evening Phone	<i>#</i> :			Туре:		
Cell Phone #:				Preference:		
Email Address						
Contact Information	on:					
Mother			Father			
	Daytime	Ev	vening		Cell	
Mother - Phone						
Father- Phone		]				
<b>Activity Informatio</b>	n:					
Program	2016 Spring Socce	er 1st - 7th Grade	Registrat Fee	s51.00 -	- \$58.65	
Volunteer to Coac	h:					
Name				Shirt Size		
Phone #		Email:				
Financial Assistance Program						
, -	ended to open up partici g because they cannot af			Iren by reducing fina	ncial obstacles for those who may	
	e to contribute \$1.0			Yes	No Thank You	
(if yes, pleas	se add your donatio	n to the registration	n fee - and THA	NK YOU!)		
Additional Comme	nts/Medical condi	tions (if any):				
Liability Wavier:						
I give permission					Parks and Recreation e READ and AGREE to the	
Parent Signature:				Da	ate:	
FOR OFFICE USE ONL	Y: 440.4505					
PAID	CK#		CASH		Ву:	
Credit Card	Number				Expires	